

# **APPLICATION FOR EMPLOYMENT**

Please submit a separate application for each position applied for.

Position applied for:				
☐ Full-Time	ne 🗖	Casual		Term
PERSONAL INFORMATION				
Name	Firet	Name		Middle Initial
Mailing Address				
City/Town			ostal Code	
Phone Number	Cell Phone Nu	mber		
Email				
Are you entitled to work in Canada?		C	] Yes	□ No
Are you presently working with the City	of Cold Lake?	C	Yes	□ No
If yes, please indicate you Employee number	er	Departme	nt	
Were you previously employed with the	City of Cold La	ke? D	Yes	□ No
If yes, please indicate you Employee number	er	Departme	nt	
EDUCATION				
Have you completed your High School I	Diploma (Grade	12)? <b>C</b>	Yes	D No

If no, please indicate your highest level of education you have completed: Grade \_\_\_\_\_

## FORMAL POST SECONDARY EDUCATION (i.e. University, College, Technical or Trade)

Educational Institution	Program	Degree/Diploma/Certificate	Completed	Year
			□ Yes □ No	
			□ Yes □ No	
			□ Yes □ No	
			□ Yes □ No	

#### ADDITIONAL SKILLS AND QUALIFICATIONS TRADE CERTIFICATIONS AND PROFESSIONAL DESIGNATIONS

Name	Licence No.	Prov.	Inter-Prov. No.

#### TOOLS AND EQUIPMENT SKILLS

Forklift, Bobcat, Sweeper, etc.	Years of Experience

#### ADDITIONAL TRAINING OR COURSES

Name of Course (i.e.: Foremanship, or Supervisor Training, WHMIS, First Aid etc.)	Level	Year

### COMPUTER SOFTWARE/APPLICATION SKILLS

If the position you are applying for requires specific computer skills, please list the application or software

Name of software or application (i.e.: Microsoft Access 97, Word, Excel, SAP, GIS, etc.)	Level	Years of Experience

### DRIVER'S LICENCE

Do you poss	ess a valid driver's lice	ence:		Yes		No		
lf yes, Provin	ce:	_ Class:						
EMPLOYM	ENT HISTORY							
1. Emplo	oyer							
Positi	on							
Dates	of Employment from		/_		to		/	(yyyy/mm)
Name	of Supervisor							

### Duties, Responsibilities and Achievements

2.	Employer
	Position
	Dates of Employment from/ to (yyyy/mm)
	Name of Supervisor
	Duties, Responsibilities and Achievements
3.	Employer
	Position
	Dates of Employment from/ to (yyyy/mm)
	Name of Supervisor
	Duties, Responsibilities and Achievements

# **REFERENCES**

Γ

Please list business/employment associates also personal references who can comment on your occupational qualifications, character and work related performances.

Name	Employer	Phone number	Job Title	Years Known

٦

# **ADDITIONAL COMMENTS**

Please use this space for further comments or information you would like to add.

I authorize the City of Cold Lake to make inquiries concerning my background, character and fitness for employment with the City of Cold Lake. I allow the City of Cold Lake to acquire information about me from the above mentioned individuals to be used to determine me as a fit applicant and to be treated in strict confidence.

**Declaration** I certify that the information made by me in this application is true and complete. I understand and agree that a false statement may disqualify me from this competition.

Date

Signature

The City of Cold Lake is an equal opportunity employer. This information is being collected under the authority of the *Freedom of Information and Protection of Privacy Act*. This information will be used to determine whether the applicant qualifies for a position within the City of Cold Lake. This information will also be used by the City of Cold Lake Human Resources Department.

We thank all applicants for their interest. Only candidates selected will be contacted for interviews. Submit applications to:

(780) 594-4041 (Fax) humanresources@coldlake.com

5513 - 48 Avenue, Cold Lake, AB • T9M 1A1 • Ph: 780-594-4494 • Fax: 780-594-34804

Information on this form is collected for the sole use of the City of Cold Lake and is protected under the authority of the Freedom of Information and Protection of Privacy Act, Sec. 33 (c) which regulates the collection, use and disclosure of personal information.